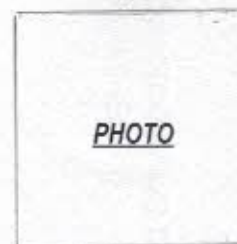


DISABILITY CERTIFICATE



PHOTO

This is certified that Shri / Smt. /Kum..... son/wife/daughter
of Shri..... age..... is
sex..... identification mark(s)..... is
suffering from permanent disability of following category :

A. Locomotor or cerebral palsy :

- (i) BL-Both legs affected but not arms
- (ii) BA-Both arms affected (a) Impaired reach (b) Weakness of grip
- (iii) BLA-Both legs and both arms affected
- (iv) OL-One leg affected (right or left) (a) Impaired reach (b) Weakness of grip (c) Ataxic
- (v) OA-One arm affected (a) Impaired reach (b) Weakness of grip (c) Ataxic
- (vi) BH-Stiff back and hips (Cannot sit or stoop)
- (vii) MW-Muscular weakness and limited physical endurance

B. Blindness or Low Vision :

- (i) B-Blind & PB-Partially Blind : NOT ADMISSIBLE

C. Hearing impairment :

- (i) D-Deaf
 - (ii) PD-Partially Deaf
- (Delete the category whichever is not applicable)

2. This condition is progressive / non-progressive / likely to improve / not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of _____ years _____ months.*

3. Percentage of disability in his/her case is percent.

4. Sh./Smt./Kum..... meets the following physical requirements for discharge of his/her duties :-

- | | |
|--|--------|
| (i) F-can perform work by manipulating with fingers. | Yes/No |
| (ii) PP-can perform work by pulling and pushing. | Yes/No |
| (iii) L-can perform work by lifting. | Yes/No |
| (iv) KC-can perform work by kneeling and crouching | Yes/No |
| (v) B-can perform work by bending | Yes/No |
| (vi) S-can perform work by sitting | Yes/No |
| (vii) ST-can perform work by standing | Yes/No |
| (viii) W-can perform work by walking | Yes/No |
| (ix) SE-can perform work by seeing | Yes/No |
| (x) H-can perform work by hearing/speaking | Yes/No |
| (xi) RW-can perform work by reading and writing | Yes/No |

(Dr.....)
Member
Medical Board

(Dr.....)
Member
Medical Board

(Dr.....)
Chairperson
Medical Board

*Strike out which is not applicable.

Countersigned by the
Medical Superintendent/CMO/Head of Hospital (with seal).